

10F2

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 9/594673		FILING DATE					
						APPLICANT(S)							
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		°		°	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51	/					
2	/						52	/					
3		/					53	/					
4		/					54	/					
5	/						55	/					
6	/						56	/					
7	/						57		2				
8		/					58		6				
9		/					59		10				
10	/						60		6				
11	/						61		9				
12	/						62		2				
13		/					63		2				
14		/					64		2				
15	/						65		2				
16	/						66	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto; position: relative;"> </div>					
17	/						67						
18		/					68			/			
19		/					69			/			
20	/						70			/			
21	/						71			/			
22	/						72			/			
23		/					73			/			
24		/					74			/			
25	/						75			/			
26	/						76			/			
27	/						77			/			
28		/					78	/					
29		/					79	/					
30	/						80	/					
31	/						81	/					
32	/						82		2				
33		/					83	/					
34		/					84		/				
35	/						85		/				
36	/						86	/					
37	/						87	/					
38		/					88	/					
39		/					89		/				
40	/						90	/					
41		10					91		/				
42	/						92		/				
43	/						93		/				
44	/						94		/				
45	/						95	/					
46	/						96		/				
47	/						97		/				
48	/						98		/				
49	/						99	/					
50	/						100	/					
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

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							APPLICANT(S)						
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	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
101		1					51						
102	1						52						
103	1						53						
104	1						54						
105	1						55						
106		2					56						
107		1					57						
108		1					58						
109		1					59						
10							60						
11							61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
20							70						
21							71						
22							72						
23							73						
24							74						
25							75						
26							76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	55						TOTAL IND.						
TOTAL DEP.	85						TOTAL DEP.						
TOTAL CLAIMS	140						TOTAL CLAIMS						